UNITED STATES DISTRICT COURT

for the

Western District of Oklahoma

Division
22 172 G
(to be filled in by the Clerk's Office)
Jury Trial: (check one) Yes No
FILED
FEB 2 8 2022
CARMELITA REEDER SHINN, CLERK U.S. DIST. COURT. WESTERN DIST. OKLA. BY, DEPUTY

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Non-Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.



1. The Parties to This Complaint

A. The Plaintiff(s)

B.

Duovida the information heleve for a	each plaintiff named in the complaint. Attach additional pages if						
Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.							
Name Address	ADUEISHA CAMERELLE PAYLLE Sto. 1968 3. COOSH HWY #5699 Cabura Beach, California [99651]						
County Telephone Number E-Mail Address	Crarge County Late 121-8040 cammypaine gnail com						
The Defendant(s)	V						
individual, a government agency, ar include the person's job or title (if k	ach defendant named in the complaint, whether the defendant is an organization, or a corporation. For an individual defendant, nown) and check whether you are bringing this complaint against official capacity, or both. Attach additional pages if needed.						
Defendant No. 1							
Name	AUTO ADVANTAGE FINANCE LLC.						
Job or Title (if known)	and the second of the second line						
Address	OKUMMU CAY, OKLANOMA 13104 - 453) State State Zip Code						
County	OKlahma						
Telephone Number	7405) (132-0090						
E-Mail Address (if known)							
	Utindividual capacity Gotficial capacity						
Defendant No. 2							
Name							
Job or Title (if known)							
Address							
	City State Zip Code						
County	City State 21p code						
Telephone Number							
E-Mail Address (if known)							
	Individual capacity Official capacity						

	Defendant No. 3			
	Name			
	Job or Title (if known)			
	Address			
		City	State	Zip Code
	County	ALCOHOL TO THE REAL PROPERTY OF THE PARTY OF		
	Telephone Number			
	E-Mail Address (if known)	144,7		
		Individual capacity	Official capa	ncity
	Defendant No. 4			
	Name ·			
	Job or Title (if known)			
	Address			
		City	State	Zip Code
	County			
	Telephone Number			
	E-Mail Address (if known)			
		Individual capacity	Official capa	city
Basis	s for Jurisdiction			
immı Fede	er 42 U.S.C. § 1983, you may sue statunities secured by the Constitution and ral Bureau of Narcotics, 403 U.S. 38 citutional rights.	d [federal laws]." Under Bive	ns v. Six Unknowr	n Named Agents of
A.	Are you bringing suit against (chec	ck all that apply):		
	Federal officials (a Bivens cla	nim)		
	State or local officials (a § 19	983 claim)		
	Section 1983 allows claims allegi	ng the "deprivation of any righ]." 42 U.S.C. § 1983. If you	are suing under se	ction 1983, what
B.	federal constitution and [federal laws federal constitutional or statutory	right(s) do you claim is/are be	ing violated by sta	ate or local officials
B.		right(s) do you claim is/are be	ing violated by sta	ate or local officials

officials?

D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

Please sex attached Stokement of amplant and Affidavet of Tricts

III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

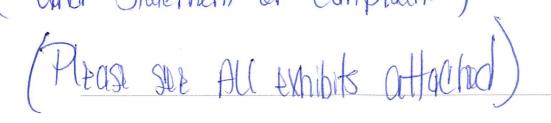
A. Where did the events giving rise to your claim(s) occur?

Please she attached Stotement of Clamplaint and Africavit of Touth

B. What date and approximate time did the events giving rise to your claim(s) occur?

Please see attached statement of ampliant

C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)



IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did not receive.

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V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

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VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing:	7/6097		
	Signature of Plaintiff Printed Name of Plaintiff	esto Camerello Rago eisto Camprello Pagne I	V, LCC 1-309 BA AQUESTA	CAMEBELL
В.	For Attorneys			RESER
	Date of signing:			
	Signature of Attorney			
	Printed Name of Attorney			
	Bar Number			
	Name of Law Firm			
	Address			
	-	City	State	Zip Code
	Telephone Number			
	E-mail Address			

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